



Technical Assistance Opportunity Partnership Grants

STATE OF NEW JERSEY
DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT

Fiscal Year 2020

Division of Workforce

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Opportunity Partnership Grant Program Technical Assistance

Fiscal Year 2020

The purpose of the Opportunity Partnership Grant (OPG) program

The purpose of the [Opportunity Partnership Grant \(OPG\) program](#) is to assist displaced/dislocated workers secure employment by providing high-quality occupational training in growth industry sectors recognized and driven by employer's needs. The ultimate goal of the Opportunity Partnership Grant program is to re-connect participants with gainful employment opportunities, with the objectives of financial self-sufficiency and career advancement coupled with increased earnings. In an effort to provide training services that are needed in the prospective occupational area, applicants are encouraged to review the Labor Market Information Data for Occupational Listings at the LWD website: http://www.nj.gov/labor/lpa/LMI_index.html.

The Opportunity Partnership Grant training program is designed to support the development of high-quality industry-specific work-based learning, pre-apprenticeship training, or vocational training components that contributes to a high-skilled, high-paid workforce.

All applicants must provide an application in accordance with the requirements listed within the NGO.

OPG customers are the students

Most OPG students are receiving UI benefits or have received within the last 12 months or others who meet the definition of displaced/dislocated worker as defined by the federal Workforce Innovation Opportunity Act (WIOA).

The decision as to 'qualifying' students' is determined by the local One-Stop Career Center Counselor.

The Department will focus their investments on training programs that result in high-quality industry specific occupational training. Funds are appropriated to develop skills for displaced/dislocated individuals that result in employment in a labor demand occupation. Therefore, it is essential that service providers form industry sector partnerships with employers.

The training offered must lead to an industry recognized certificate or credential that produces occupational opportunity for in-demand industry sectors.

Frequently Asked Questions

I. Who may apply for OPG?

Service providers of employment and training services are eligible to apply, including but not limited to:

- New Jersey's Workforce Development Boards (WDB's) who engage external "third-party" training providers,
- Post-secondary educational institutions, and
- Training providers who are approved by LWD.

All training providers must be registered on the LWD Eligible Training Provider List (ETPL) at <http://www.njtopps.org/>. Applicants who engage external "third-party" training provider(s) must include the contact information (name, address, e-mail address and phone number) in their proposal; external "third-party" training providers must be approved by LWD. Grantees may not assign or subcontract with other service or training provider(s) without the written consent and authorization of LWD. An attempted assignment or subcontract without LWD's written consent shall void the contract.

- **Workforce Investment Board applicants** who apply as a service provider should adhere to WIOA guidance:
 - In order to effectively promote and develop quality training and industry sector strategies, it is vital that WIOA's "Individualized Career Services" program and OSCC partner programs work together to ensure a customer-centered approach to service delivery. *Third-party training providers must be listed on the LWD approved list (ETPL) and included in the proposal.*
 - Individuals who are qualified and meet the eligibility criteria for both the Opportunity Partnership Grant and WIOA Title I (Adult, Dislocated Worker, Youth-age 18 and older) may be co-enrolled in both programs. Staff must record assessments, referrals, and participation in both programs in the individual's AOSOS record.
 - Co-enrollment is defined as enrollment in two or more WIOA programs (e.g., contracts for training services), and/or special grant programs funded by the State. Co-enrollments benefit the Customer Job-Seeker and may be used to leverage services that are available to ensure a positive outcome. Coordination of co-enrollment will eliminate the duplication of these services and reduce the amount of time staff spends providing intensive services such as case management, job search assistance, and follow-up services. The OSCC network seeks to co-enroll for the benefit of the Customer with services from other programs that supplement and/or enhance those services not to duplicate them.

The successful applicant will serve as the entire legal entity, the lead agency of record, the legally recognized fiscal agent for the grant project, and the single point of contact for LWD. The lead agency will be responsible for overseeing the implementation of all aspects of the grant such as curriculum, training logistics, recruitment of candidates in collaboration with the OSCC assigned OSCC liaison, trainee's job placement as agreement with employer-partner(s), program monitoring and reporting, the spending plan, and fiscal management of the grant award.

II. How do I get started?

1. To do business in New Jersey, applicants must register with the NJ Department of Treasury.

How does an applicant register to do business with New Jersey?

Tax Clearance certificates may be requested online through the State of New Jersey's [Premier Business Services \(PBS\) portal](#).

- The use of the portal replaces the need for the paper application submission to the Division of Taxation; the processing fee is also waived with the use of the portal.
- Each applicant will be able to print the necessary clearance certificate through their business's portal account and must submit it with the proposal.

2. Applicants must be cleared with NJ Department of Labor (LWD) Employer Accounts

What does it mean to be cleared with LWD?

Tax liabilities must be paid up to date or not exceed \$750.

3. Applicants must have the capacity to serve as the lead agency

What is a lead agency?

The successful applicant will serve as the lead agency of record, the legally recognized fiscal agent for the grant project, and the single point of contact.

- The lead agency is responsible for overseeing the implementation of all aspects of the grant (e.g., interaction with employer(s), curriculum development, logistics, recruitment in collaboration with the OSCC, monitoring/reporting, and fiscal management of the grant award).

4. Applicants must register on the LWD Eligible Training Provider List (ETPL).

How does an applicant register on the ETPL?

The Department's website www.njtopps.org is available to access information about New Jersey's ETPL training provider list and how to apply.

- If the applicant receives a grant, in cases where the applicant is not the training provider, LWD will request "pending status only" for the Opportunity Partnership Grant.

5. Applicants must offer occupational training in industries with jobs that are in-demand

The applicant provides training that offers a certificate of completion and if a requirement of the job the associated **industry-recognized credential**--the Department gives priority to training programs that result in an industry-recognized credential for a

middle-skill or high-skill job.

- Middle-skill jobs are defined as occupations that require **less than** a bachelor's degree but more than a high school degree.
- High-skill jobs are defined as occupations that require long-term on-the-job training, post-secondary vocational training, or a post-secondary degree.
- Work-based learning provides trainees with real-life work experiences where both classroom learning and hands-on, technical skill development enhance employability.

What are the in-demand industry sectors for job seekers?

Occupational training must fall within a labor demand occupation in one of the state's targeted industry sectors or in a labor demand occupation determined by the local Workforce Development Boards (WDBs).

How do I know what industry sectors are in-demand?

The state's in-demand industry sectors include:

- Advanced Manufacturing
- Life Sciences
- Construction/Utilities
- Financial Services
- Health Care
- Retail, Hospitality, and Tourism
- Technology
- Transportation, Logistics, and Distribution, **or** an industry determined in-demand by the local area Workforce Development Board. To review Labor Demand occupations, applicants are encouraged to review the Labor Market Information Data for Occupational Listings at the LWD website: http://www.nj.gov/labor/lpa/LMI_index.html

6. Applicants must partner with at least one employer to form an employer-partner relationship

How important are employer-partner arrangements?

Employer- partner relationships are the fundamental purpose of the Opportunity Partnership Grant and integral to the proposal. Providers are expected to have arrangements with employers who plan to hire the successful training graduates.

- The applicant identifies employer(s) who have a need for workers trained for their specific job title.
- The applicant partners with employers who offer full-time positions with a wage of at least \$15/hour.
- The applicant proposes a number of training slots based on the number of the employer's potential job openings--the objective is for the business to hire the trainee(s) who graduate from the course.

- *Employer's Letter of Support: The applicant should obtain a letter of support from each employer.... should the department determine that the employer's prescribed role in the partnership does not exist, the applicant's proposal will not be considered for panel review."*
 - *Employer-Partners' Letter of Support must be on company letterhead that contains the company's phone number and signed by a company official who understands their role in the training provider-employer partnership.*
- *During the Department's screening process of the applicant's proposal and review of the Employer-Partner form (Attachment C), the Department will contact the employer's hiring manager to verify that the employer recognizes and acknowledges their role in the training provider-employer partnership. Note: Each employer listed in Attachment C must be listed in Attachment D*
- *Should the department determine that the employer's prescribed role in the partnership does not exist, the applicant's proposal will not be considered for panel review.*

7. Applicants must schedule an appointment to meet with a representative from the local Workforce Development Board

Why is it important to contact the local Workforce Development Board?

- *Local area Workforce Development Boards (WDB) are critical for the success of the OPG training program. The applicant should discuss the proposed project and intent to apply for the Opportunity Partnership Grant which is State funded through the Workforce Development Partnership Program (WDPP) (see LWD local area directory in folder).*

III. Who may receive training?

Potential trainees must be registered at one of the State's certified One-Stop Career Centers (OSCC) which are located throughout New Jersey.

Who are the eligible trainees that the grantee serves?

- *The OSCC counselor or representative at the OSCC will make the eligibility determination through an interview* with the potential trainee to develop an Employability Development Plan*

IV. What is the maximum amount I may budget in my proposal?

Applicants may budget a cost of up to \$6,000 for each qualified individual. The total maximum budget amount per proposal, may be up to \$200,000 which is based on the number of individual training costs. (\$200,000 / \$6,000 = training up to 33 individuals)

- *This cost may include all planning, training, administrative, and follow-up directly related to the cost of training (e.g., cost of instructors, consultants, facilitators, books,*

supplies and/or equipment) which have been specifically identified by the training provider as a requirement for successfully completing a course or training program.

- Application fees and other fees, may also be paid under the grant program. These acceptable fees related to a training program include but are not limited to: background checks, library fees, lab fees, computer lab fees, test fees, and all third-party testing and licensure cost if required.
- **The trainee must not incur any costs either associated with the training or as a condition of employment unless otherwise contractually defined.**

V. How do Providers get paid if awarded a grant?

Depending on the amount requested in your budget and approved by LWD, providers may invoice no more than \$6,000 for each qualified trainee using the following benchmarks:

1. Twenty-five percent of total approved cost per trainee after enrollment and the course starts.
2. Twenty-five percent of total approved cost per trainee after 'contract hours' mid-point.
3. Forty percent of total approved cost per trainee after the course completes and the trainee receives their credential.
4. Ten percent of total approved cost per trainee after the trainee is hired and placed into a full-time training related position if within 90 days of completing the training or the extension date approved by LWD.

VI How many proposals may an applicant submit?*

Applicants are not limited to one proposal; however, only one proposal may be submitted per job title. The employer-partner may have a need to hire various job titles that have different training requirements and associated costs; therefore, a separate proposal must be submitted for each job title. Additionally, no more than one industry-sector should be targeted in the applicant's proposal. Also note, a proposal may serve multiple training sites.

***We encourage the applicant to work with our Program Specialist staff to seek improvement or answer any questions you may have.**

VII. How does LWD select proposals?

Each proposal is evaluated by a panel review committee. The committee use the criteria provided in the Notice of Grant Opportunity. Proposals are scored and numerically tallied. Proposals selected must receive an average score of 70 or above.

- the panel review committee examines and compares the cost structure of similar courses offered in the industry as well as those listed on the ETPL to determine if the applicant's training course **is comparatively priced.-**

- *The applicant's proposal is scored using the assigned points that are indicated in the NGO--the applicant's proposal receives points for each section, based upon how well the proposal addresses that criterion--the total passing score is 70 percent.*

Proposals are screened before the panel review committee receives them

Applicants should use the pre-panel checklist as a guide when preparing the application to ensure that the proposal includes all criteria.

If your proposal does not meet or include all of the screening criteria, it will not move forward for panel review process and will not be considered for funding.

VIII. Pre-Panel Check List Standard Requirements

**See checklist on page 12:*

- Application received on time
- Seven proposals (two proposals with original signatures plus five copies)
- Employer's role is verified by telephone/follow-up email
- Service provider is on LWD Eligible Training Provider List (ETPL) or Education Institution
- NJ Treasury Tax Clearance Business Certificate dated within 180 days of application
- Standard Assurances and Certifications page is signed
- General Provisions page is signed
- LWD Wage and Hour Employer Accounts are paid up -to-date

IX. How do I assemble my proposal?

We urge you to follow the order below when you assemble your proposal. The proposal should be submitted in the following order:

- Attachment (A) - Applicant's Title Page Complete and w/signature
- Attachment (B) - Budget Summary Form Complete
- Attachment (C) - Employer's Job Analysis Description Form Complete
- Attachment (D) - Employer Partner Summary Form is complete
- Attachment (E) Third-Party Training Provider Summary Form (if applicable)
- Standard Assurances and Certifications page is signed
- General Provisions page is signed
- NJ Treasury Tax Clearance Business Certificate dated within 180 days of application
- Executive Summary and Program Narratives

X. What are the panel review committee's criteria and key evaluation* questions?

**See Score Sheet form on page 13*

Executive Summary (max. 2 single-sided pages)

- Did the applicant describe their operational capacity and areas of expertise?
- Did the applicant describe the employer's industry and the location in which the training will be held?
- Did the applicant describe how they will track the student's performance including job placement?

Program narrative (max. 8 pages)

Need

- Did the applicant explain the employer(s) need to hire workers trained in this occupation?
- Did the applicant describe how the employer(s) determined the number of new hires needed?

Training Plan

- Did the applicant describe how the training will be implemented, including the time-line, etc.?
- Did the applicant state the proposed number of training candidates will not exceed the proposed number of job openings

Performance Metrics/Outcome

- Did the applicant describe a plan for the trainee's transition into job placement?
- Did the applicant describe the tracking methods to assess, retain, evaluate, and measure the performance of the training program?
- Did the applicant propose a contingency/back-up plan to ensure the outcome of job placement for the trainee?

Certificate/Credential Attainment

- Did the applicant describe the credential including the name of the conferring authority, accrediting organization, and the state and/or federal licensing agency if licensure is a requirement of the job.?
- Did the applicant verify that no additional training and/or certificate(s)/credential(s) are required before the employer hires the trainee?

The Budget and Budget Narrative

The budget* should indicate the proposed line item expenditures

** "Sample of a budget" form on page 15 below:*

- Budget indicates total number of instructional hours per trainee.
- Budget indicates training cost per hour per trainee.
- Budget indicates training cost per trainee.
- Budget indicates number of trainees.
- Budget indicates administrative costs.
- Budget indicates other cost associated with training.

The budget narrative and budget form should be accurately aligned and reasonably based on the activities outlined in the program narrative:

1. Does the budget narrative accurately describe the proposed line item expenditures?
2. Are the budget line items based on the activities outlined in the budget narrative?
3. Are the budget items within the cost guidelines of the NGO?
4. Budget items are comparatively priced with other training providers
5. The trainee must not incur any costs either associated with the training or as a condition of employment. The successful applicant will be held accountable for the number of participants projected to be trained.

XI When are the submission and review dates?

- Proposals must be received by 3 p.m. on the due dates listed below in Section H., Submission Date of this NGO. Postmarks are not acceptable evidence of submission; receipt by the due date and time is required.
- Applicants are encouraged to send the proposal by certified mail, return receipt requested, arrange for hand delivery or delivery by an overnight delivery service to ensure timely delivery and receipt of the proposal.
- Proposals received by the due date and time will be screened to determine if the proposal meets the threshold criteria and are, in fact, eligible for panel review. LWD reserves the right to reject any proposal not in conformance with the requirements of this NGO.
- The applicant must also have available upon request by LWD, the electronic version (MS Word and MS Excel) of the proposal package including employer-partner information and completed Attachment forms.
- Failure to include any of the required documentation will result in the proposal being removed from consideration for panel review. A proposal received after the stated submittal deadline may be held for the next available panel review date during the program year if funding is still available.

Proposals are reviewed based on the availability of funding, beginning September 2019 and ending June 2020. Below is the proposal deadline submission dates, and panel review dates*.

Submission Date Application to LWD by 3 p.m. on:	Panel Review week of:
Monday August 19, 2019	September 16, 2019
Monday January 13, 2020	February 24, 2020
Monday May 11, 2020	June 15, 2020

*Dates listed in this NGO may be subject to change; changes will be posted on LWD’s web page.
 All decisions to accept and process grant proposal will be based on the availability of funds.

Submit Proposal to:

New Jersey Department of Labor and Workforce Development
 Division of Workforce Development and Economic Opportunity
 Attention: Ms. Gerri Brosh, Opportunity Partnership Grant Program
 1 John Fitch Plaza – 7th Floor
 P.O. Box 055
 Trenton, New Jersey 08625-0055

XII When will I be notified if I received the grant?

All proposals are subject to a Department panel review and final approval by the Commissioner of the Department. Applicants will be notified of the final determination of their request when LWD’s internal finalization process is completed.

LWD Review and Pre-Panel Checklist Before Panel Review

APPLICANT'S NAME:	
INDUSTRY SECTOR:	APPLICANT'S ID#: OPGFY20 _____
JOB TITLE:	
CREDENTIAL:	Panel Review Date:

Assigned Specialist:	Panel Ready and Supervisor Approved? Yes or No:
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OPG Checklist Before Panel Review			
Yes or No	Content	Prior Contract/Performance	
	Application received on time	Previous Grantee (Yes/No)?	
	Seven proposals (two proposals with original signatures plus five copies)	If Yes, Fiscal year?	
	Each Employer's Letter of Support Included	Is grant closed (Yes/No)	
	Verify each employer's role by telephone follow-up email	Is training in progress (Yes/No)?	
	Verify if approved training provider (ETPL) or Education Institution	If grant is in progress what is the end date?	
	Applicant's Title Page Complete (Attachment A)	Credential Provided	
	Budget Summary Complete (Attachment B)	Cost per Trainee	
	Each Employer's Job Analysis Description form Complete (Attachment C)	Number contracted	
	The Employer Partner Summary Form is complete (Attachment D)	Number enrolled	
	Third-Party Training Provider Summary Form (Attachment E)	Number dropped	
	Standard Assurances and Certifications (Page X) are signed	Number completed	
	General Provisions (Page X) are signed		
	NJ Treasury Tax Clearance Certificate dated within 180 days of application	Number placed	
	LWD Employer Accounts are paid up-to-date or owe less than \$750 threshold	Prior Contract Assigned Specialist:	
	Did applicant ever have a contract with the Workforce Development Board, if yes, location of WDB		

SCORE SHEET - OPPORTUNITY PARTNERSHIP GRANTS -

Applicant's Name: _____				App ID#: _____			
Training Industry Sector: _____							
Training Title: _____				Panel Review Date: _____			
SCORING/EVALUATION CRITERIA			Value	Score	PANELIST SCORES: Initial Final		
• Executive Summary			Max	10	Exe. Summary - Maximum	10	
• Did the applicant describe their operational capacity and areas of expertise?			0-5		Need - Maximum	20	
• Did the applicant describe the employer-partner(s) industry and the location in which the training will be held?			0-3		Training Plan - Maximum	20	
• Did the applicant describe how they will track the student's performance including job placement?			0-2		Performance - Maximum	20	
Comments:			Total		Cert./Cred. - Maximum	20	
1	Need		Max	20	Budget - Maximum	10	
1.1	Did the applicant explain the employer(s) need to hire workers trained in this occupation?		0-10		Total Score - Maximum	100	
1.2	Did the applicant describe how the employer(s) determined the number of new hires needed?		0-10		Passing = 70		
Comments:			Total		Panelist, provide a brief summary below to justify your score:		
2	Training Plan		Max	20			
2.1	Did the applicant describe how the training will be implemented, including the time-line?		0-10				
2.2	Did the applicant state the proposed number of training candidates will not exceed the proposed number of job openings		0-10				
Comments:			Total				
3	Performance Metrics/Outcome		Max	20			
3.1	Did the applicant describe a plan for the trainee's transition into job placement?		0-10				
3.2	Did the applicant propose a contingency plan to ensure the outcome of a job placement for the trainee?		0-10				
Comments:			Total				
4	Certificate/Credential Attainment		Max	20			
4.1	Did the applicant describe the credential including the name of the conferring authority, accrediting organization, and the state and/or federal licensing agency if licensure is a requirement of the job?		0-10				
4.2	Did the applicant verify that no additional training and/or certificate(s)/credential(s) are required before the employer hires the trainee?		0-10				
Comments:			Total				
5	Budget Narrative and Budget Form		Max	10			
5.1	Does the budget narrative accurately describe the proposed line item expenditures?		0-5				
5.2	Do any budget items need revision (If yes, which item(s)?)		0-5		Use reverse side if additional comments are needed		
Comments:			Total		Scored by:		

Opportunity Partnership Training Grant

Notice of Grant Opportunity
Fiscal Year 2020

ATTACHMENTS

Title Page	Attachment A
Budget Form	Attachment B
Employer-Partner Job Analysis/Description Form	Attachment C
Employer Summary Form	Attachment D
Third-Party Training Provider Summary Form	Attachment E
Standard Assurances and Certifications & General Provisions Signature Pages	

**Opportunity Partnership Grants
Fiscal Year 2020**

Name of Grant Applicant/Lead Agency:				
Street Address:				
City:	State:	Zip:	County:	District Number:
Contact Person:	Phone:	Email:		
FEIN #:	Training Provider is affiliated with a New Jersey Higher Education Institution?			(Y/N)
DUNS #:	Training Provider is Listed on the Eligible Training Provider List?			(Y/N)
Industry Sector:	Training Course is Listed on Eligible Training Provider List?			(Y/N)
CIP or SOC Code #:	Does this training meet the employer's approval and all conditions to start working for the employer?			(Y/N)
Title of Training Program:	County of Training:	County of Job Location:		
Title of Industry-valued Credential(s) or Certification(s):			# of Course Clock Hours Per Trainee:	
Title of Job expected to be filled by trainees (only one job title) :			# of Students To Be Trained:	
			# of Projected Job Openings:	
Starting Wage Basis of Calculation (hourly, salary, commission, etc.):	Starting wage:	# of Employer-Partners:		
		# of Work Hours Per Week:		
Total Grant Request:			Training Cost Per Trainee:	
Previous Funding: Did the applicant receive funding from LWD within the last three years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of grant and award amount:				
PROPOSAL CERTIFICATION: <i>To the best of my knowledge and belief, the information contained in this proposal is true and correct. The document has been duly authorized by the governing body of this agency and, if funding is awarded, we will comply with the attached General Provisions.</i>				
Authorized Signature:				
Print Name:	Title:			Date:

EXAMPLE OF A BUDGET

(Attachment B)

**Budget Example
Opportunity Partnership Grants Training
Grant
Fiscal Year 2020**

Grantee Name:
State Certified Eligible Training Provider

Street Address, City, State, Zip
Any Street, Any City, Any State Training Provider Certified to Train in NJ, Zip

Contact Name:
Person with operational responsibility

Telephone:
Person's number with operational responsibility

Email Address:
Operational_person@email.address

Amount Requested:
Example: \$145,337.50

Cost per Trainee:
Example: \$5,813.50

Hours of Instruction per Trainee:
Example: 100

Example Description of Budget Structure	Amount
A. Examples of Itemized Direct Costs	Direct Costs
• 100 hours of Instruction @ \$38.25/hr. per trainee. = \$3,825/trainee x 25 trainees =	\$ 95,625.00
• 40 hours of Instructional-job assistance/trainee @ \$25/hr. = \$1,000/trainee x 25 trainees =	\$ 25,000.00
• Uniforms/shoes @ \$100/trainee x 25 trainees =	\$ 2,500.00
• Books @ \$100/trainee x 25 trainees =	\$ 2,500.00
• Supplies/tools @ \$100/trainee x 25 trainees =	\$ 2,500.00
• Testing fees @ \$160/trainee x 25 trainees =	\$ 4,000.00
Applicants may budget a cost of no more than \$6,000 per trainee. This cost may include all planning, training, administrative, training related and follow-up costs.	
• cost of instructors, facilitators, consultants, books, supplies and/or equipment which have been specifically identified by the training provider and/or employer as a requirement for successfully completing a course or training program.	
• These acceptable fees related to a training program include but are not limited to: application or other fees, background checks if a requirement of employment, library fees, lab fees, computer lab fees, test fees, and all third-party testing and licensing cost if required.	
Direct Costs Sub-Total A	\$ 132,125.00
B. Itemized Administrative Costs (No more than 10% of Direct Costs)	Administrative Costs
• Office Personnel	\$ 13,000.00
• Office Supplies	\$ 212.50
Administrative Costs Sub-Total B	\$ 13,212.50
Sub-Total A plus Sub-Total B = TOTAL GRANT REQUEST	\$ 145,337.50
Number of trainees:	25
C. Cost per trainee (Total cost divided by number of trainees)	Cost per trainee: \$ 5,813.50

**Budget
Opportunity Partnership Grants Training
Grant
Fiscal Year 2020**

Grantee Name:		
Street Address, City, State, Zip		
Contact Name:	Telephone:	Email Address:
Amount Requested:	Cost per Trainee:	Hours of Instruction per Trainee:

Budget Items	Amount
A. Itemized Direct Costs	Direct Costs
Sub-Total A	\$
B. Itemized Administrative Costs (No more than 10% of Direct Costs)	Administrative Costs
Sub-Total B	\$
Sub-Total A plus Sub-Total B = TOTAL GRANT REQUEST	\$
Number of trainees:	
C. Cost per trainee (Total cost divided by number of trainees) Cost per trainee:	\$



Opportunity Partnership Grants Program – Employer-Partner Job Analysis/Description

The purpose of this form is for training providers to gather information about training for job openings and the employer's requirements to ensure that One-Stop Career Center registered customers/training candidates are properly evaluated prior to accepting training into the program. Submit one form for each employer and one form for each specific job title.

Name of Training Program: _____

Industry Sector: _____

Duration of training per cohort (# of weeks; # of days/week; # of hours/day): _____

Location of training: _____

Name of Training Provider: _____ FEIN/Federal Tax ID #: _____

Contact Person: _____ Phone: _____ Email: _____

PURPOSE AND CONTENT OF TRAINING: DESCRIPTION / MINIMUM ENTRANCE REQUIREMENTS / CREDENTIAL / SKILLS:

Should the applicant receive a training grant, information below will be utilized by the One-Stop Career Center staff to source and recruit candidates for the training program. The trainee must not incur any costs either associated with the training or as a condition of employment.

Briefly explain in one or two sentences the general purpose of this training as it relates to the employer's job position: _____

What are the prerequisites and qualifications to be considered for training? _____

List certifications, credentials, skills, etc. included as part of the training: _____

Specify and describe if the position requires additional cost, testing, experience, etc. beyond this training: _____

Employer Company Name: _____ Federal Employer ID: _____

Address: _____ City: _____ State: _____ Zip: _____ County: _____

Phone: _____ Website: _____

Check One Industry Sector: Advanced Manufacturing; Financial Services; Health Care; Life Sciences (Pharmaceuticals, Biotechnology, Medical Devices); Retail, Hospitality and Tourism; Technology and Entrepreneurship; Transportation, Logistics and Distribution; Construction or Other: _____

Employer Contact Information: First Name: _____ Last Name: _____ Mr./Ms. Title: _____ Job Title: _____

Phone: _____ E-mail: _____

Job /Work Location Information:

Specific Job Title: _____ Municipality: _____ Zip: _____ County: _____ Number of Job Openings: _____

Hours/Week: _____ Work Hours _____ Work Shift: _____

Starting Pay: \$ _____ Method of calculating pay: (hourly, salary, commission, tips, etc.) _____

Check benefits offered: Health Ins. Sick Leave Dental Ins. Vacation Holidays 401 K

Is driver's license required for position: Yes No (check one)

Is additional training or certification required beyond this training program prior to hire by the employer? Yes No (check one)

REQUIREMENTS OF THE EMPLOYER / ESSENTIAL FUNCTIONS AND QUALITIES OF NEW EMPLOYEE (Job eligibility criteria)

What are the essential functions (what does this job entail) of the position? _____

What is the minimum level of education required to perform essential functions? _____

What is the level of knowledge of software, technology, and/or equipment required to perform essential functions? _____

What is the reading proficiency grade level required to perform the essential functions? _____

What are the special licenses or certifications required to perform essential functions? _____

What is the level of customer interaction/service required to perform essential functions? _____

What are the years of work-related experience required to perform essential functions? _____

On the next page, describe as clearly and concisely as possible the employer's view of the ideal qualities a new hire should possess and any additional information that is important to fully understand the responsibly, scope and nature of the job position and essential functions: _____

Employer Summary Form

Attachment D

	Company Name	Address, City, State, Zip, County	Contact Name	Phone	Email	Industry Sector	# New Hires
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							

Third-Party Training Provider Summary Form

Attachment E

	Company Name	Address, City, State, Zip, County	Contact Name	Phone	Email	Industry Sector Credential Offered and Licensing Agency
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

STANDARD ASSURANCES AND CERTIFICATIONS

1) UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS (2 CFR PART 200)

As a condition to the award of Federal financial assistance, the recipient or subrecipient assures that it will fully abide by all regulations of 2 CFR Chapter I, Chapter II, Part 200

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (Street address, city, county, state, ZIP code)

Check () if there are workplaces on file that are not identified.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

Printed Name and Title **Signature**

Date

GENERAL PROVISIONS

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above general provisions.

Printed Name and Title

Signature

Date